



PATENT
Atty. Docket No. BSC-164

TECH CENTER 1600/2900

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Li *et al.*

SERIAL NUMBER: 09/813,780

GROUP NUMBER: 1615

FILING DATE: March 21, 2001

EXAMINER: Ware, Todd

TITLE: CONTROLLING RESORPTION OF BIORESORBABLE
MEDICAL IMPLANT MATERIAL

11/Suppl B

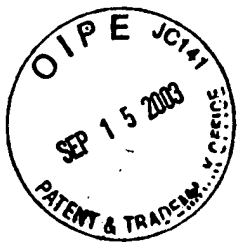
Be
10-17-03

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

After the Amendment mailed on August 19, 2003 is entered, please enter this Amendment. Applicants believe that the Amendment mailed on August 19, 2003 is fully responsive to the Office action mailed on May 20, 2003, and that no extension or fee is due to have the present Amendment entered.

Please enter the following amendments.



Attorney Docket No. 1615-164

PATENT
TECH CENTER 1600/2600

SEP 16 2003

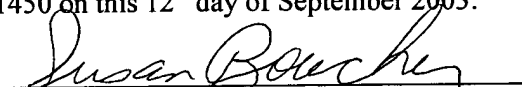
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Li et al.
SERIAL NO.: 09/813,780 GROUP NO.: 1615
FILING DATE: March 21, 2001 EXAMINER: Ware, Todd D.
TITLE: Controlling Resorption of Bioresorbable Medical Implant Material

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Mail Stop Non-Fee Amendment; Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 12th day of September 2003.


Susan Boucher

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

Transmittal Form (1 page);
Amendment (10 pages); and
Return-Receipt Postcard

2682005_1

1615



TRANSMITTAL FORM

Application Serial Number	09/813,780
Filing Date	March 21, 2001
First Named Inventor	Li
Group Art Unit	1615
Examiner Name	Ware, Todd
Attorney Docket No.	BSC-164
Patent No.	Not applicable
Issue Date	Not applicable

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ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
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SIGNATURE BLOCK

Respectfully submitted,

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